

10/569078

IAP12 Rec'd PCMAK 21 FEB 2006

Application Data Sheet

**Application Information**

Application number::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit:: N/A  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?:: None  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF::  
Title:: METHOD FOR DIAGNOSING HEAD AND  
NECK SQUAMOUS CELL CARCINOMA  
Attorney Docket Number:: 0113019.00152US3  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets::  
Small Entity?:: Yes  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency:: National Institutes of Health/National Cancer  
Institute  
Contract or Grant Numbers:: CA85067  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Kenneth  
Middle Name:: Donald  
Family Name:: SOMERS  
Name Suffix::  
City of Residence:: Norfolk  
State or Province of Residence:: VA  
Country of Residence:: US  
Street of mailing address:: 621 Graydon Avenue

City of mailing address:: Norfolk  
State or Province of mailing address:: VA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 23507

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Bao-Ling  
Middle Name::  
Family Name:: ADAM  
Name Suffix::  
City of Residence:: Norfolk  
State or Province of Residence:: VA  
Country of Residence:: US  
Street of mailing address:: 769 W. 52nd Street

City of mailing address:: Norfolk  
State or Province of mailing address:: VA

Country of mailing address::

Postal or Zip Code of mailing address:: 23508

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: George

Middle Name:: L.

Family Name:: WRIGHT, Jr.

Name Suffix::

City of Residence:: Virginia Beach

State or Province of Residence:: VA

Country of Residence:: US

Street of mailing address:: 829 Moultrie Court

City of mailing address:: Virginia Beach

State or Province of mailing address:: VA

Country of mailing address::

Postal or Zip Code of mailing address:: 23455

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Jeffery

Middle Name:: Tradnor

Family Name:: WADSWORTH

Name Suffix::

City of Residence:: Suffolk

State or Province of Residence:: VA

Country of Residence:: US

Street of mailing address:: 5002 Marsh Ridge Court

City of mailing address:: Suffolk  
State or Province of mailing address:: VA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 23435

#### **Correspondence Information**

Correspondence Customer Number:: 24395

#### **Representative Information**

Representative Customer Number:: 24395

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	371 of	US04/026872	08/19/04
US04/026872	An application claiming the benefit under 35 USC 119(e)	60/495878	08/19/03
US04/026872	An application claiming the benefit under 35 USC 119(e)	60/496682	08/21/03

#### **Assignee Information**

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